

SANNES SKOGDALEN NRSG FACILITY
101 SUNSHINE BLVD

SOLDIERS GROVE 54655 Phone: (608) 624-5244
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 66
Total Licensed Bed Capacity (12/31/04): 66
Number of Residents on 12/31/04: 62

Ownership: Nonprofit Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 57

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		38.7	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		40.3	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.6	More Than 4 Years		21.0	
Day Services	No	Mental Illness (Org./Psy)	22.6	65 - 74	8.1			-----	
Respite Care	No	Mental Illness (Other)	11.3	75 - 84	30.6			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.4	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.6		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	3.2		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	12.9	65 & Over	98.4	-----			
Transportation	No	Cerebrovascular	16.1		-----	RNs		9.6	
Referral Service	No	Diabetes	6.5	Gender	%	LPNs		4.0	
Other Services	No	Respiratory	1.6		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	24.2	Male	38.7	Aides, & Orderlies			
Mentally Ill	No	-----	-----	Female	61.3	42.6			
Provide Day Programming for			100.0		-----	-----			
Developmentally Disabled	No				100.0	-----			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay		Family Care		Managed Care					
		No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	2	4.1	139	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	3.2
Skilled Care	3	100.0	271	43	87.8	119	0	0.0	0	7	87.5	141	0	0.0	0	2	100.0	246	88.7
Intermediate	---	---	---	4	8.2	99	0	0.0	0	1	12.5	131	0	0.0	0	0	0.0	5	8.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		49	100.0		0	0.0		8	100.0		0	0.0		2	100.0	62	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	15.6	Bathing	1.6	79.0	19.4	62
Private Home/With Home Health	12.5	Dressing	16.1	67.7	16.1	62
Other Nursing Homes	7.8	Transferring	33.9	45.2	21.0	62
Acute Care Hospitals	60.9	Toilet Use	24.2	56.5	19.4	62
Psych. Hosp.-MR/DD Facilities	0.0	Eating	66.1	24.2	9.7	62
Rehabilitation Hospitals	0.0	*****				
Other Locations	3.1	Continence		%	Special Treatments	%
Total Number of Admissions	64	Indwelling Or External Catheter	0.0		Receiving Respiratory Care	1.6
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	38.7		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	21.2	Occ/Freq. Incontinent of Bowel	12.9		Receiving Suctioning	0.0
Private Home/With Home Health	30.8				Receiving Ostomy Care	0.0
Other Nursing Homes	0.0	Mobility			Receiving Tube Feeding	0.0
Acute Care Hospitals	13.5	Physically Restrained	8.1		Receiving Mechanically Altered Diets	22.6
Psych. Hosp.-MR/DD Facilities	0.0				Other Resident Characteristics	
Rehabilitation Hospitals	1.9	Skin Care			Have Advance Directives	37.1
Other Locations	0.0	With Pressure Sores	1.6		Medications	
Deaths	32.7	With Rashes	1.6		Receiving Psychoactive Drugs	56.5
Total Number of Discharges (Including Deaths)	52					

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	86.4	87.4	0.99	85.5	1.01	85.9	1.01	88.8	0.97
Current Residents from In-County	61.3	76.6	0.80	71.5	0.86	75.1	0.82	77.4	0.79
Admissions from In-County, Still Residing	18.8	21.5	0.87	20.7	0.91	20.5	0.92	19.4	0.97
Admissions/Average Daily Census	112.3	125.9	0.89	125.2	0.90	132.0	0.85	146.5	0.77
Discharges/Average Daily Census	91.2	124.5	0.73	123.1	0.74	131.4	0.69	148.0	0.62
Discharges To Private Residence/Average Daily Census	47.4	51.0	0.93	55.7	0.85	61.0	0.78	66.9	0.71
Residents Receiving Skilled Care	91.9	95.2	0.97	95.8	0.96	95.8	0.96	89.9	1.02
Residents Aged 65 and Older	98.4	96.2	1.02	93.1	1.06	93.2	1.06	87.9	1.12
Title 19 (Medicaid) Funded Residents	79.0	69.6	1.14	69.1	1.14	70.0	1.13	66.1	1.20
Private Pay Funded Residents	12.9	21.4	0.60	20.2	0.64	18.5	0.70	20.6	0.63
Developmentally Disabled Residents	0.0	0.4	0.00	0.5	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	33.9	40.3	0.84	38.6	0.88	36.6	0.93	33.6	1.01
General Medical Service Residents	24.2	17.9	1.35	18.9	1.28	19.7	1.23	21.1	1.15
Impaired ADL (Mean)	44.8	47.6	0.94	46.2	0.97	47.6	0.94	49.4	0.91
Psychological Problems	56.5	57.1	0.99	59.0	0.96	57.1	0.99	57.7	0.98
Nursing Care Required (Mean)	3.4	7.3	0.47	7.0	0.49	7.3	0.47	7.4	0.46